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Under the Paperwork F	NT APPLICAT	5, no persons an	e required to resp	ond to	a collection of i	nformation u	Office; U	.S. DEPARTMEN lisplays a valid Ol	IT OF COMME
	Application or Docket Number								
(SMALL	ENTITY	0	OTI R SMA	OTHER THAN SMALL ENTITY			
FOR NUMBER FILED NUMBER EXTRA					RATE		7	SIVIA	CL ENTITY
BASIC FEE (37 CFR 1.16(a))					TOTE .	FEE	-	RATE	FEE
TOTAL CLAIMS (37 CFR 1.16(c))	minu	rs 20 = .		7	X \$ =	\$	→ of	` 	\$
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minu	s 3 = .				 	OF OF	X \$=	
MULTIPLE DEPENDENT C))	\dashv	X \$=	 	OR	× \$=	-		
	_	+ \$=		OR	+ \$=	<u> </u>			
* If the difference in colum			TOTAL		OR	TOTAL			
CLAIM	1S AS AMENDE	D – PART II							
	olumn 1)	(Column 2	2) (Column 3)		SMALL E	NTITY	OR	OTHE	R THAN
7/25/05 RE	CLAIMS MAINING	HIGHEST NUMBER	PRESENT	X	RATE	ADDI-	7		ENTITY
71 1 1	AFTER ENDMENT	PREVIOUSL PAID FOR	Y EXTRA			TIONAL		RATE	ADDI- TIONAL
(37 CFR 1.16(c)) Z Independent	20 Minus	20	= /	\prod	x s=		OR	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	FEE /
(37 CFR 1.16(b))	3 Minus	3	=/	7 [x \$_ =		1	X \$=	
FIRST PRESENTATION	OF MULTIPLE DEPEN	DENT CLAIM (37	CFF 1.16(d))	1 [+\$ =	/	OR	× \$=	/
RLE		TOTAL		OR	TOTAL	/			
,	lumn 1)	(Column 2)	(Column 3)	,	ADD'L FEE		OR	ADD'L FEE	L., /
tions to be	LAIMS MAINING	HIGHEST NUMBER	PRESENT	ÍГ		-/ 1			
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FIRST PRESENTATION C	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				· s = -	/ 	OR	× \$=	/
			7		S = /		OR	+\$ =	_/_
10.1				A	DD'L FEE		OR	ADD'L FEE	\bot
	mn 1) AIMS	(Column 2) HIGHEST	(Column 3)	_		<u> </u>	_		
REMA AF	AINING TER	NUMBER PREVIOUSLY	PRESENT EXTRA	1		ADDI-		RATE	ADDI-
Total •	DMENT Minus	PAID FOR	-	_		IONAL FEE	L		TIONAL FEE
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Total (37 CFR 1.16(c)) Independent (37 CFR 1.16(b)) FIRST RESERVATION OF				x :	s =		OR	x \$ =	
FIRST PRESENTATION OF	MULTIPLE DEPENDE	NT CLAIM (37 CF	R 1.16(d))	+ 1	=	_	OR	+ s =	
I If the entered				TO AD	TAL D'L FEE		_	TOTAL ADD'L FEE	
 If the entry in column 1 is If the "Highest Number P If the "Highest Number P 							<i></i> , ,	,	
The "Highest Number Pre	viously Paid For" (Te	N THIS SPACE IS		er "3".		nntonriete t	i		Ī

USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Effective October 1, 2001									10007789					
CLAIMS AS FILED - PART I (Column 1) (Column						mn 2)	SMALL ENTITY TYPE			OR	OTHER			
TOTAL CLAIMS			14				RA	ſΕ	FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			19 minus 20=		•		X\$	9=		OR	X\$18=			
IND	EPENDENT CL	AIMS	Ominus 3 =				X4:	2=		OR	X84=			
MULTIPLE DEPENDENT CLAIM PRESENT							+14	n-			+280=			
• If	the difference	in column 1 is	less than ze	ero, ente	r "0" in c	olumn 2	TOT	_	370	OR	TOTAL			
7-250) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									ENTITY	OR	OTHER SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA	RAT	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FIEE		
MON	Total	• 20	Minus	**	19	- \	X\$	9=		OR	X\$18≖			
AME	Independent	• 3	Minus		2	•	X42	<u>:</u> =		OR	X84=			
	FIRST PRESE	NTATION OF MU	JETIPLE DEF	PENDEN	CLAIM		+14	0=.		OR	+280=			
							ADDIT.	TAL FEE		OR	TOTAL ADDIT. FEE			
		(Column 1)	T 1 (5 5 3) 1	(Colu		(Column 3)								
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI PAID	BER OUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		8	X\$ 9	}=	3	OR	X\$18=			
AME	Independent	•	Minus	444		<u> </u>	X42	.		OR	X84=			
	FIRST PRESE	NTATION OF MI	JETIPLE DEF	ENDEN	0	77	+14)=		OR	+280=	•		
			(U)	101	0		ADDIT.	TAL FEE		OR	TOYAL ADDIT, FEE			
		(Column 1)		(Colu		(Column 3)								
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
ZQX QX	Total		eun!M	**	•	•	X\$ 9)=		OR	X\$18=			
ME	Independent	•	Minus	1937		•	X42			OR	X84=			
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	T CLAIM		+140							
• 1	* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.									OR	+280=			
**	if the "Highest Nu	mber Previously Pa	ald For IN THE	S SPACE	is less that	n 20, enter "20."	ADDIT.	TAL		OR	TOTAL ADDIT. FEE			
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														
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PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2001												
CLAIMS AS FILED - PART I (Column 1) (Column 2)									YTITY	OR	OTHER SMALL I	
TOTAL CLAIMS			14		:		F	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	370.00	OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	19 minus 20= *		•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			— minus 3 = 1		*			(42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT										OR	+280=	
* If	the difference	in column 1 is l	ess than ze	ro, ente	r "0" in c	olumn 2	<u> </u>	TOTAL 370		OR	TOTAL	
	CLAIMS AS AMENDED - PART II										OTHER	THAN
_		(Column 1)		(Colu	mn 2)	(Column 3)	S	MALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	. F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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AME	Independent	•	Minus ***			-		(42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=		OR	+280=	
TOTAL ADDIT. FEE										OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	REST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	*	Minus	**		=)	(\$ 9=		OR	X\$18=	
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	FINOI PRESE	NIAHON OF MU	CITIFIE DEF		00	77	<u>'</u> [-	140=		OR	+280=	
			(i)	101			ADE	TOTAL OIT. FEE		OR	TOTAL ADDIT. FEE	_ 4
		(Column 1)	7	(Colu		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=] [>	(\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***			15	(42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	TCLAIM		¹ ├	140=			+280=	
		mn 1 is less than ti					L.	TOTAL		OR	TOTAL	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											
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Application or Docket Number